

4-H Healthy Living Logic Model – Prevention of Injuries

SITUATION

Millions of people are incapacitated by injuries, with many suffering lifelong disabilities. In addition to disability and loss of life, the cost of serious injury can be staggering. For youth, injuries can lead to anxiety, inordinate demands being placed on family and friends, and time lost from school, clubs, and teams.

Injuries account for more than 60% of all deaths among adolescents (www.childstats.gov, 2008). For children ages 5-14, accidents were the leading cause of death in 2008. More persons aged 1-34 years die as a result of injuries than any other cause of death with motor vehicle crashes accounting for approximately half of those deaths (Healthy People 2010, pp. 15-4). Motor vehicle traffic and firearm injuries accounted for 71% of injury-related deaths among adolescents in 2006. According to the National Highway, Traffic and Safety Administration (NHTSA), driving while using a cell phone degrades driver performance. The NHTSA estimates that driver distraction from all sources contributes to 25 percent of all police-reported traffic crashes (www.nhtsa.dot.gov).

Many of these injuries are predictable and preventable through understanding why the injury occurred and how it might be avoided in the future.

4-H HEALTHY LIVING LOGIC MODEL DETAILS

- Outcomes appropriate for children ages 5-9 are noted as *(child)*
- Outcomes appropriate for youth ages 10-19 are noted as *(youth)*
- Outcomes appropriate for family and community are noted as *(family)*

OUTCOMES:

Short – Learning (Knowledge, Attitudes, Skills, Aspirations – KASA)

- (youth) increased knowledge of the impact of risky behaviors and poor decision-making on health and safety
- (youth) increased knowledge, attitudes, skills to intervene and prevent peer-on-peer bullying incidents
- (youth) increased knowledge, attitudes acknowledging one's own responsibility to prevent injuries
- (child, youth, family) increased knowledge, attitudes, skills and aspirations related to ATV, bike, hunter safety, cell-phone distractions and sports and recreational safety

Mid – Actions (Behavior)

- (youth) reduced bullying among youth
- (youth, family) decreased proportion of youth who report that they rode with someone who was driving impaired or drove irresponsibly themselves (reduced reckless driving)

- (youth) increased youth mastery and safe handling of ATV, bike, hunting equipment, driving, sports and recreational vehicles
- (child, youth, family) increased use of seatbelts and helmets
- (child, youth, family) reduction in environmental risk factors and promote preventive techniques to reduce injuries from sports and recreational activities
- (family) children and youth actively promote practices that prevent injuries

Long – Conditions

- Youth organize community actions and engage in peer-to-peer efforts related to personal safety issues and educational choices.
- (youth, family) reduced risk behaviors
- (youth, family) reduced injuries related to participating with ATV, bike, hunting equipment, motor vehicles
- (child, youth, family) decreased risk for serious disease and illness, physical and emotional distress

ACTIVITIES

Who We Target (Audiences)

- Youth (with special focus on new and underserved), families, staff, volunteers, community leaders, partner organizations, and collaborators

What We Do (Activities)

- Promote safety through social marketing campaigns
- Assess the safety of the physical environment
- Conduct education sessions and use effective curricula
- Promote safety through physical education classes, sports, and recreational activities
- Involve coalitions, service organizations, families and individuals, and businesses in promoting safe use of equipment, cars, and sports equipment (e.g., bicycles)
- Provide staff development to promote safety and prevent unintentional injuries
- Support businesses in safe practices and not selling alcohol to minors
- Model safety in event planning, outdoor activities, and social events
- Design and implement programs with multiple components such as using environmental changes, policy changes, social marketing campaigns, curricula that meet injury prevention standards for skill building and self-efficacy, and involve families in meaningful ways

OUTPUTS

What We Produce (Tangible Products)

- Cooperative and experiential learning, peer mentoring, family engagement, non-formal

educational programs, projects, trainings, workshops, internships and apprenticeships, applied research, evaluations, convened coalitions, grant proposals developed and awarded, needs assessments, social marketing campaigns disseminate and replicate programs, publish curricula and peer-reviewed articles/resources

INPUTS

- Evidence-based and promising curricula and programs
- The network of Land Grant and Public Universities
- Human Resources (paid staff, volunteers, instructors, specialists, leaders, and stakeholders)
- Existing 4-H Youth Development and Families delivery modes and programs
- National reports and standards (e.g., Healthy People 2020) that establish benchmarks for Healthy Living outcomes
- National partners with interest in supporting Extension's 4-H Healthy Living network
- Published and unpublished research and valid literature focused on health behaviors, health promotion, youth development, family development, and community development
- Financial supports such as grants, categorical funding, and fees
- Relationships with national, regional, state and local health experts, public health networks and health advocates
- Facilities – local, state, and regional
- Youth leaders and partnerships with networks of young people
- Electronic resources (e.g., eXtension, web conferencing, and wikis)

ASSUMPTIONS/GIVENS

- The contributions 4-H makes to positive youth development through multi-generational, mixed-gender, family-engaged, and non-formal education are valuable to healthy living of all youth.
- Extension is ready to make unique contributions to the health and well-being of young people and their families thanks to its multi-level network, ability to interpret and appropriately apply research findings to improve human quality of life, and sustained citizen input and involvement.
- Young people and their families will need to be involved in meaningful learning experiences.
- 4-H Healthy Living program development and program implementation will focus on the risk and protective factors that influence the health outcomes of young people.
- Health behaviors are complex and there will continue to be risk and protective factors on which 4-H Healthy Living programs will have little impact. Thus, clearly identifying those risks and protective factors that are related to 4-H programming is critical for demonstrating the effectiveness of efforts.
- Youth will face an increasing amount of choices and opportunities in all facets of their lives; therefore, 4-H Healthy Living programs will evolve with those choices and opportunities.

- Youth and their families can improve their health through increased healthy living knowledge, taking advantage of resources, and by reducing health risk factors.
- Youth and their families have the ability to reach optimal physical, social/emotional health, and well-being.

ENVIRONMENTAL – EXTERNAL FACTORS

- Families will continue to face resource constraints (i.e., time, money, and transportation).
- Demands on family time will continue to be a factor in the programs they choose to participate in over time.
- Changes in society and health practices/services/access will impact young people and their families.
- Research will continue to inform the connections between healthy living and positive youth development.
- Obesity prevention and health improvements will continue to be a core mission of USDA/AFRI and state Extension systems.

EVALUTION PLAN COMPONENTS

- Safety survey, demonstration, certification
- Trained observer report and rating
- Track public health surveillance data
- Checklist or portfolio
- KASA (knowledge, attitudes, skills and aspirations/ intentions) data gathered via surveys, focus groups, interviews
- Health behavior change and health behaviors maintenance data gathered via surveys, focus groups, interviews, case studies, and reports from trained observers
- Learner self-reports focused on outcomes
- Program effectiveness RE-AIM data (www.re-aim.org)
- Process evaluations/accomplishments
- Monitor existing trends and surveillance data from other studies and networks
- Youth risk survey, portfolio of activities and life changes
- Monitor ES237 data
- Review of state Healthy Living plans across regions

RESOURCES

America's Children: Key National Indicators of Well-Being (2009) Retrieved August 1, 2009 from www.childstats.gov

National Highway, Traffic and Safety Administration (NHTSA). Retrieved October 2, 2009 from www.nhtsa.dot.gov.

MMWR. School Health Guidelines to Prevent Unintentional Injuries and Violence). Dec. 7, 2001; 50(R22): 1-46.

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Healthy People 2010 (include Healthy People 2020 draft objectives) Retrieved on Nov. 6, 2009 from www.healthypeople.gov/HP2020/Objectives/TopicAreas.aspx

NC region 4-H Logic Model

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